

RELEASE FORM

I authorize the OPI to use the			
	work vocal recording name quotations other:	artwork music poetry, essays, or other literary works photograph or likeness	
Of			
Such request should be mailed to: Montana Office of Public Instruction OPI Contact Name: P.O. Box 202501 Helena, Montana 59620-2501			
If the person named above is a minor, I am the parent or legal guardian of the minor and consent to the use of the above subject as described above. I have the legal right to issue such consent.			
School Name:			
Signature:			
Phone number:			
Address:			
Date:			
OPI Contact:			